TITLE:



INFANT MONITORING SYSTEM AND METHOD

AS A BELOW NAMED INVEIN. R, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe that I am the original, first and sole (if only one name is listed below), or an original, first and joint inventor (if plural names are listed below), of the subject matter which is claimed and for which a patent is sought on the invention entitled:

(Application Number)	(Country)	(Day/Monin/Tear Jilea)	
Thereby claim the benefit und International application designating that application is not disclosed in the price	he United States, listed below a or United States or PCT Intern	(Day/Month/Year filed)  of any United States application(s), or §3  nd, insofar as the subject matter of each of national application(s) in the manner pro-	365(c) of any PCT of the claims of this ovided by the first
	§1.56(a) which became availa	ble between the filing date of the prior a	
60/119,268 (Application Serial Number)	February 9, 1999 (Filing Date)	Pending (STATUS: patented, pending, aban	-

I hereby appoint the following attorneys: FRANK CHAU, Reg. No. 34,136; JAMES J. BITETTO, Reg. No. 40,513; FRANK V. DeROSA, Reg. No. 43,584; and GASPARE J. RANDAZZO, Reg. No. 41,528; each of them of F. CHAU & ASSOCIATES, LLP, 1900 Hempstead Turnpike, Suite 501, East Meadow, New York 11554 to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith and with any divisional, continuation, continuation-in-part, reissue or re-examination application, with full power of appointment and with full power to substitute an associate attorney or agent, and to receive all patents which may issue thereon, and request that all correspondence be addressed :0:

> Frank Chau, Esq. F. CHAU & ASSOCIATES, LLP 1900 Hempstead Turnpike, Suite 501 East Meadow, New York 11554

Area Code: 516-357-0091

FULL NAME OF FIRST OR SOLE INVENTOR: John Chaco Citizenship USA Inventor's signature: 1 Great Meadow Road Residence & Post Office Address: Seymour, CT 06483. FULL NAME OF SECOND INVENTOR: Citizenship \_\_\_\_ Inventor's signature: Residence & Post Office Address: FULL NAME OF THIRD INVENTOR: \_\_\_\_\_\_ Citizenship \_\_\_\_\_ Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Residence & Post Office Address: FULLINAME OF FOURTH INVENTOR: \_\_\_\_\_ Citizenship \_\_\_\_\_ \_\_\_\_\_\_ Date: \_\_\_\_\_ Inventor's signature: \_\_\_ Residence & Post Office Address: ΠJ ËΨ FULLENAME OF FIFTH INVENTOR: \_\_\_\_\_ Citizenship \_\_\_\_\_ Inventor's signature: \_\_ Residence & Post Office Address: FULL NAME OF SIXTH INVENTOR: \_\_\_\_\_ Citizenship \_\_\_\_\_ Inventor's signature: \_\_\_\_ Residence & Post Office Address: FULL NAME OF SEVENTH INVENTOR: \_\_\_\_\_ Citizenship \_\_\_\_\_ Inventor's signature: \_\_\_ \_\_ Date: Residence & Post Office Address:

I HEREBY DECLARE that all state and ade herein of my own knowledge are true that all statements made on information and belief are believed to be true; and full lier that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 U.S. Code and that such willful false

statements may jeopardize the validity of the application or any patent issued thereon.